## PART B - FEE(S) TRANSMITTAL

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Indi Anderson findi anderson

July 27, 2010

I hereby certify that this Fee(s) Transmittal is being deposite States Postal Service with sufficient postage to first the mail in addressed to the Mail Step 1881-1 11b address above, or being transmitted to the USPTO 4871) 277-2005, on the date indicated belonger

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CONFIRMATION NO

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1 Michael Best & Friedrich LLP

Date

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	07/29/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
LAMPRECHT, JOEL		3737	600-410000	•		
. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list		Michael Rest & Friedrich I I P	

or agents OR, alternatively,

(1) the names of up to 3 registered patent attorneys

(2) the name of a single firm (having as a member a

registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

FIRST NAMED INVENTOR

Chris H. Wood

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

TITLE OF INVENTION: SYSTEM AND METHOD FOR ADAPTIVE MEDICAL IMAGE REGISTRATION

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Merge CAD Inc. Bellevue, Washington

Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🗵 Corporation or other private group entity 🖵 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed.

Payment by credit card. Form PTO 2038 is attached. Publication Fee (No small entity discount permitted)

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EII ING DATE

06/20/2003

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"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer

04/20/2010

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MICHAEL BEST & FRIEDRICH LLP

23400

Suite 3300 MILWAUKEE, WI 53202

APPLICATION NO.

10/600.044

Number is required.

a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /carlo m. cotrone/ July 27, 2010 Carlo M. Cotrone Registration No. 48715 Typed or printed name

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